

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 707465

FILED  
Apr 11, 2003  
Secretary of State

**Entity Name:** BIG BROTHERS/BIG SISTERS OF GREATER MIAMI, INC.

**Current Principal Place of Business:**

701 S.W. 27TH AVENUE  
SUITE 800  
MIAMI, FL 33135

**New Principal Place of Business:**

**Current Mailing Address:**

701 S.W. 27TH AVENUE  
SUITE 800  
MIAMI, FL 33135

**New Mailing Address:**

**FEI Number:** 59-6166904      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MUNIZ, LYDIA I.  
701 S.W. 27TH AVENUE  
SUITE 800  
MIAMI, FL 33135 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: CE ( ) Delete  
Name: VALDES-FAULI, RAUL  
Address: 555 NE 34TH ST #2004  
City-St-Zip: MIAMI, FL 33137

Title: C ( ) Delete  
Name: TOBER, JOHN E  
Address: 1401 BRICKELL AVE #340  
City-St-Zip: MIAMI, FL 33131

Title: T ( ) Delete  
Name: TASCOTTI, DANIEL  
Address: 11901 NW 21ST STREET  
City-St-Zip: PEMBROKE PINES, FL 33026

Title: S ( ) Delete  
Name: CRABTREE, BONNIE  
Address: 1700 DAYTONA RD  
City-St-Zip: MIAMI BEACH, FL 33141

Title: D ( ) Delete  
Name: STEIN, MARK  
Address: 255 ALHAMBRA CR #555  
City-St-Zip: CORAL GABLES, FL 33134

Title: D ( ) Delete  
Name: PRINZING, DANIEL G  
Address: 1280 S ALHAMBRA CIRCLE #1227  
City-St-Zip: CORAL GABLES, FL 33146

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RAUL VALDES-FAULI

CE

04/11/2003

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date